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ABSTRACT

A pilot study surveyed radio broadcasters in Arkansas, Missouri, Oklahoma, and Texas to further an understanding of their role as gatekeepers for public service announcements (PSA) to educate audiences about AIDS and bring about "safe" behavior. A total of 300 stations were in the sample. Respondents were asked to provide information about their stations and their stations' use of HIV/AIDS PSAs. Most broadcasters reported using HIV/AIDS PSAs (76.1%). About one-third of broadcasters who reported not using the PSAs claimed they had never been offered any such announcements to broadcast. Most respondents agreed that HIV/AIDS is a significant national and local public health threat (almost 70% reported knowing someone with HIV or AIDS). Yet many broadcasters expressed reservations about the ability of PSAs to effect necessary behavioral change in the audience. Statistically significant differences were found between broadcasters who use PSAs and those who do not, in five areas which relate to message content and acceptance by audiences. (Contains 33 references; appendixes list stations for survey (by market) and provide a breakdown of how the survey instrument addressed the questions. Survey instrument is also attached.) (Author/NKA)

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Public Service Announcements and the Fight Against AIDS:

A Survey of Radio Broadcasters' Attitudes and Policies

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Paper presented at the annual meeting of the Speech Communication Association, San Antonio, Texas, November 20, 1995. The research described in this article was funded by, and carried out with the assistance of, the Research Support Center at Cameron University in Lawton, Oklahoma, where the author was a faculty member 1992-95. The author is now Assistant Professor of Journalism and Public Relations at Oklahoma Baptist University, Shawnee, Oklahoma. The author is a doctoral candidate at the University of Oklahoma. Inquiries about this article may be directed to the author at Oklahoma Baptist University, 500 W. University Blvd., Box 61308, Shawnee, Olahoma, 74801 (or) dswanson@obunix.okbu.edu.

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Abstract

This paper summarizes the findings of a pilot study of radio broadcasters in Arkansas, Missouri, Oklahoma, and Texas. Broadcasters were surveyed in an effort to further our understanding of their role as gatekeepers for public service announcements (PSA) to educate audiences about AIDS, and bring about "safe" behavior. Respondents were asked to provide information about their stations, and their stations' use of HIV-/AIDS PSAs. Most broadcasters reported using HIV-/AIDS PSAs (76.1%). About one-third of broadcasters who reported not using the PSAs claimed they had never been offered any such announcements for broadcast. Most respondents agreed that HIV-/AIDS is a significant national and local public health threat (almost 70% reported knowing someone with HIV- or AIDS). Yet, many broadcasters expressed reservations about the ability of PSAs to effect necessary behavioral change in the audience. Statistically significant differences were found between broadcasters who use PSAs and those who do not, in five areas which relate to message content and acceptance by audiences.

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Public Service Announcements and the Fight Against AIDS:

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Background

Although initially a disorder which was perceived as an illness involving "marginalized groups, especially gay men" (Herek & Glunt, 1988, Abstract), Acquired Immune Deficiency Syndrome is now recognized as a potential threat to all members of society. In the United States today, those at risk for AIDS--or HIV, the virus identified as the precursor of AIDS--include 12 million people who are diagnosed annually with one or more of the dozens of sexually-transmitted diseases, ten million men who have had sex with other men, one million intravenous drug users, and "millions of others who will have sex with one or more new partners" (Peterman, Cates, & Wasserheit, 1992, p. 443). Once acquired, the virus may take up to ten years to develop. But in all cases, it leads to a slow, painful death.

AIDS was first officially identified in the U.S. in 1981. By 1988, it was the third leading cause of death among American men aged 25 to 44. (Chu, Berkelman, & Curren, 1992). Late in 1993, the U.S. Centers for Disease Control announced AIDS had advanced to become the leading cause of death for men in that age category ("AIDS is top killer. . . ", 1993). Between 1988 and 1994, the number of Americans with AIDS doubled. By July of 1994, more than 411,000 Americans had AIDS; 204,000 were already dead. Of four million people world-wide who have been diagnosed with "full-blown AIDS", 42 percent are Americans. The total number of Americans diagnosed with AIDS has been increasing at the rate of three to five percent annually ("Full-blown AIDS. . . ", 1994; see also Brown, 1991).

American society pays a staggering cost to AIDS through productive lives lost. But the impact of AIDS is more than just economic; AIDS is changing our social and political climate. Never before has there been "an organized group of sick people" competing for

public attention, recognition, and resources, Kolata writes (1990, p. 12). He argues that AIDS is "no longer mainly a medical story, if it ever was. The material may be medical . . . but decisions are made in political context" (p. 12). Our nation strains to provide the social services and medical attention that the HIV/AIDS epidemic and those affected are demanding.

There been a tremendous amount of energy put forth to stimulate public discussion on the causes and symptoms of AIDS, along with a massive effort to prevent Americans from acquiring the infection in the first place. And yet, the full intent of the effort is unrealized: "Over 95% of Americans feel they are at little or no risk of developing AIDS" write Peterman, Cates, and Wasserheit (1992, p. 443).

Clearly, we must do a better job communicating with the American public on the dangers of HIV infection and AIDS, and much of this communication must come through the broadcast media which permeate our society. This survey proposal is an effort toward that end: It advocates that we reach out to radio broadcasters, to find out more about these broadcasters, their use of AIDS public service announcements, and their opinions as to the most effective ways to communicate vital information about AIDS to the nation. In the end, it's hoped this effort will give us more information we need to deal with AIDS and the people it affects in the "more open and supportive way" suggested by Peterman, Cates, and Wasserheit (1992, p. 449). After all, as the above authors remind us--"The epidemic will not wait."

Problem

AIDS was first publicized in the media at the national level and continues to be perceived mainly as a story of national and international concern (Grube & Boehme-Duerr, 1988; Toufexis, 1987). In an effort to educate the national public to the dangers of AIDS (and later of HIV infection as a separate issue), in the mid-1980s the U.S. Centers for Disease Control and the Department of Health and Human Services launched the federal government's

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primary outreach effort, "America Responds to AIDS". This radio and television campaign continues today with a new series of PSAs each year. Other agencies which produce HIV/AIDS PSAs include the Ad Council, the American Red Cross, the Will Rogers Institute and the Episcopal Church (See Myrick, 1994; Freimuth, Hammond, Edgar, & Monahan, 1990). Independent- and commercially-produced paid announcements and PSAs have been broadcast over MTV and through other media outlets. But the dissemination of these spots created by other entities does not appear to be as widespread as those issued by the "America Responds to AIDS" campaign.

Over the years (and partially in response to complaints about "America Responds to AIDS") there have been calls for greater development of PSAs at the local level. Merritt and Rowe, for example, contend that state and local governments should be responsible for the control of the AIDS epidemic and the many social and ethical considerations associated with it. But they also find that most state and local governments, strapped for funds as a result of the Reagan-Bush years, are unable to do so (Merritt & Rowe, 1988, p. 19). As a result, as recently as 1990 "the production of PSAs by state departments of health was not common" (Freimuth, Hammond, Edgar, & Monahan, 1990, p. 779).

There is a large amount of literature available for review on the general use of PSAs in health and safety campaigns. TV and radio PSAs have been found to be helpful in delivering general information to general audiences (Hastings, Eadie & Scott, 1990; Blosser & Roberts, 1985; Bosompra, 1989; Stroman & Seltzer, 1989; O'Keefe, 1985; Hanneman & McEwen, 1973). Millions of dollars worth of TV air time is set aside annually in the U.S. for PSAs; more than 120,000 AIDS PSAs alone were aired on TV between October, 1987, and December, 1990 ("More than 120,000. . .", 1991). PSAs dealing with the subject of AIDS air over stations in all the major markets in the U.S. as well as overseas ("American Advertising Federation . . .", 1989, p. C9; Toufexis, 1987).

The vast majority of communication research into PSAs regarding health issues focuses on traditional rhetorical analysis and effects studies, in an attempt to determine what information the spots contain, and whether people are watching and listening to them. Most of this research is consistent in that it finds PSAs do contain valuable general information, and that the information can be assimilated by a general audience (Hales-Mabry, 1987; Ramirez et al, 1983; Chicci & Guthrie, 1982).

AIDS PSAs have been subjected to content analysis by researchers Freimuth, Hammond, Edgar, and Monahan (1990)--who sought to determine whether PSAs were developed to facilitate behavioral change. Their study of 127 PSAs concluded that PSAs generally failed to target at-risk audiences for specific behavioral change. But, by the authors' own admission, their survey left as many or more questions unresolved in regard to selection of motivational appeals, political considerations and audience feedback.

Swanson took the rhetorical approach in his study of the "America Responds to AIDS" radio and television PSAs (1993). He studied the spots' characters, plot, pace, tone, and message design--and went a step further to embrace the textual perspective of discourse, enabled/disabled powers and valuable/not valuable knowledge. But his study, being introspective and qualitative in nature, could not address the potential affects of the identified communicative elements on the intended audiences.

The textualist approach was also taken in the earlier study by Myrick, Trivoulidis, Swanson, Lam, and Al-Qhtani (1992). This study concerned itself only with the Ad Council TV PSAs, and addressed mostly the way the PSAs used visual elements to represent "power relationships at work which contribute to the constitution of meaning" (1992, p. 7). Along this same line, there has been an examination of AIDS PSAs in regard to sexual empowerment. Myrick (1994) contends that many of the current PSAs dealing with AIDS "communicate he general message that AIDS is deadly, that it comes from being irresponsible with drugs, and

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that it affects heterosexual teenagers" (1994, p. 124-125). His analysis is critical of recent campaigns for perpetrating social myths which "define and advocate a lifestyle based on. . . sexual preference" (p. 143).

Finally, Bush and Davies directed their research attention at PSA campaign planners--by surveying the opinions of people who coordinate government efforts to prevent AIDS (1989). While these researchers did find that most planners believe the campaigns have a positive impact, Bush and Davies also found that most planners disagree about how that impact comes about. There was no effort to assess broadcasters' opinions.

Research Questions

While all of the research effort to date has been valuable to help us gain more understanding of the PSAs, it still does not help us understand the specifics of how the announcements are chosen and applied by broadcasters. In order to do a better job of producing spots that affectively address AIDS, we must answer some questions about broadcasters and their critical role as gatekeepers in the AIDS information-dissemination process:

- What percentage of radio stations report using AIDS PSAs?;
- To what extent are these PSAs being broadcast?;
- What factors weigh into broadcasters' decisions on use of AIDS PSAs?;
- What do broadcasters think about the AIDS threat, and efforts to address it through PSAs?

See Appendix C for a break-down of how the instrument addresses the research questions.

Methodology

Stations sampled

A sample of 300 radio stations in Arkansas, Missouri, Oklahoma, and Texas was drawn from listings in the leading industry directory, the 1994 *Broadcasting & Cable Yearbook* (See Appendix A). The sample was stratified; ten radio stations were chosen at random from each of 27 radio markets within the four states (the Lawton, Oklahoma, market was disqualified to remove the possibility for local bias). An additional group of 30 stations was selected at random from non-urban areas in each state (communities which are not included in the *Yearbook* "radio market" zones). Both commercial and non-commercial stations were eligible for inclusion. In the case of "combo" stations (e.g. multiple radio stations operating under common management) only one of the two was eligible for inclusion in the sample. Each of the 300 stations selected was mailed a letter of introduction and a survey questionnaire, addressed to the PSA Director. A postage-paid envelope was included, to facilitate ease of return. Within two weeks after the initial mailing, post cards were sent to all 300, in an effort to encourage return of the questionnaire. Throughout the process, respondents were assured of absolute confidentiality.

Questionnaire

Each PSA Director was mailed a three-page, 40-item survey instrument (See Appendix B). The survey began with "questions of most personal interest to the respondent" and continued with queries of decreasing importance--while saving "the most difficult items for the very end" (see recommendations of Rubenstein, 1995, p. 99). To speed survey completion time and facilitate the quantification of data, 34 of the 40 questions were multiple-choice or Likert scale items. The remaining six questions required brief qualitative written responses. The author worked dilligently to develop a questionnaire that takes Babbie's counsel to heart (1990, p. 145)--to collect data efficiently, while maintaining a simple and

uncluttered "readability" that's necessary to ensure complete responses. From beginning to end, the questionnaire should have taken no longer than five minutes to complete. Great effort was taken to assure reliability and validity. Questions for the instrument were culled from questions developed in four earlier drafts; the instrument was reviewed by several faculty members and an advisory committee at Cameron University, and by a faculty advisor at the University of Oklahoma.

Findings

Surveys were returned from 49 radio stations (16.6% of the mailing of 300) representing a wide variety of markets and formats. Most of the stations were commercial broadcasters (78.7%), although non-commercial stations are also well represented (21.3%). Respondants were fairly evenly divided according to market size, with 15 (31.9%) identifying as urban market stations, 17 identifying as suburban stations (36.2%), and 15 identifying as rural stations (31.9%). Breaking the group down by state, most were from Texas (32, or 65.3%), followed by Missouri (9, or 18.4%), Arkansas (5, or 10.2%) and Oklahoma (3, or 6.2%).

- What percentage of radio stations report using AIDS PSAs?

Most respondants report broadcasting HIV-/AIDS public service announcements (35 stations, or 76.1%). Respondents seem to be able to get spots from a variety of sources. But 89.8% of the respondants also reported not being able to recall the source from which their chosen PSAs originated.

Among broadcasters who *do not* air HIV-/AIDS PSAs (11 stations, or 23.9%), several indicated the spots are inappropriate for their station or format (2 respondents, or 18%), or inappropriate for their community (3, or 27.2%). Others reported they had never been offered the PSAs for consideration (3, or 27.2%).

- To what extent are these PSAs being broadcast?

Respondants indicated a strong committment to broadcast of public service announcements in general. While most of the stations set aside 30 minutes or less each day for this activity (81.3%), a surprising number of stations offer a combined total of half-an-hour or more for PSAs (18.7%). Broadcasters reported airing spots in all 15 of the issue categories offered (e.g., arts/cultural, safety belt, birth defects, high blood pressure, etc.) On the specific issue of HIV-/AIDS, 93% of the broadcasters reported dedicating 15 minutes or less each day for PSAs, while 7% reported setting aside as much as 30 minutes for this information.

- What factors weigh into broadcasters' decisions on use of AIDS PSAs?

The typical respondent holds the title of "Program Director," has been in the business 5 years or more, has completed a college degree or post-graduate work, and is satisfied with his/her job and their radio station. No single political/social philosophy seems to dominate; 32.9% identified themselves as conservative, while 34.7% identified themselves as neutral and 22.4% identified themselves as "somewhat liberal" or "very liberal." Many of the individuals have sole decision-making authority on PSAs (43.8%), while others make decisions in concert with someone else (45.8%). The respondents do not report spending excessive amounts of time screening spots–85.7% spend less than 25% of their time on the task. A large percentage, however, may see the AIDS threat as very real, in their personal experience: 69.4% of the respondents indicated they have known someone with HIV-/AIDS.

- What do broadcasters think about the AIDS threat, and efforts to address it through PSAs?

While most broadcasters (93.8%) agree that HIV-/AIDS is a great threat to public health, 83% believe AIDS presents less of a threat in their local community than it does

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nationally. Although 87.6% of the broadcasters believe it's important to broadcast HIV-/AIDS PSAs on the radio, 68% believe the current genre of AIDS PSAs fails to "make a strong 'connection' with the listening audience." More than half of the broadcasters (56.5%) believe the PSAs fail to specifically identify "unsafe" behaviors, and fewer than 20% believe the PSAs motivate listeners to stop those behaviors. The majority of broadcasters (75.6%) indicated doubts--or outright disagreement--when asked whether AIDS PSAs portray characters who are "good role models."

A MANOVA was performed to compare the broadcasters who do air the spots with those who *do not*. Significant differences were found in five areas:

Those who use PSAs were significantly more likely to agree that the tone of the announcements is "positive and encouraging": $F(1,42) = 4.17$, $p < .05$.

Those who use PSAs were significantly more likely to agree that the overall message of the spots makes a "strong connection" with the listening audience: $F(1,43) = 6.88$, $p < .02$.

Those who broadcast AIDS PSAs were significantly more likely to agree that their station listeners seek out HIV-/AIDS information: $F(1,41) = 6.47$, $p < .02$.

Those who use PSAs were significantly more likely to agree that the PSAs direct the audience to "effective sources for additional information": $F(1,42) = 9.12$, $p < .01$.

Those who use PSAs were significantly more likely to express interest in receiving future PSAs dealing with HIV-infection and AIDS: $F(1,42) = 9.94$, $p < .01$.

Discussion

Although the findings illustrate some significant differences between the opinions of those managers who do- versus those who do not broadcast HIV-/AIDS PSAs, perhaps the most telling outcome of the survey is the lack of outreach to broadcasters by campaign

planners. Even though 76.1% of the 49 responents broadcast the messages, only one broadcaster reported a personal contact from someone developing an HIV-/AIDS education or public service campaign. The remainder gave no such indication; and, in fact, 18 respondents (36%) wrote specifically that no campaign planners had ever spoken with them. In reading the written comments, it's clear that broadcasters have some strong concerns about this and other areas in which they were questionned:

Abstinence

Much dissatisfaction was expressed by broadcasters in regard to the way HIV-/AIDS PSAs address abstinence. "The only PSAs about HIV/AIDS that this station will air are ones that promote abstinence/fidelity," wrote a Program Director for a Texas bi-lingual educational station. A Public Service Director for a country-western station in Missouri wrote that the station Program Director "wants abstinence only PSAs." Others expressed similar feelings. One Texas respondent claimed that the current genre of HIV-/AIDS PSAs "treat sex as recreation." This respondent, a PSA Director for an urban news/talk station, wrote that "Many (PSAs) are very pushy/political (and) seem to be concerned only with making indiscriminate sex safe--seem to think society owes people safe, indiscriminate sex." Several respondents, including one rural Oklahoma country-western station manager, reported their feelings that PSAs were "too explicit for our audience" (although none offered a definition of exactly what was meant by "explicit."

Audience targeting

Some comment was offered in regard to broadcasters' feelings that everyone in their audience was not being addressed in the HIV-/AIDS PSAs offered to the stations. One suburban Texas news/talk station operations manager wants to see PSAs directed at an older audience, since "AIDS/HIV isn't only affecting young people." Another, a PSA coordinator for a Texas urban contemporary station, says no Spanish-language spots have been offered.

"Maybe they don't have any HIV/AIDS PSAs in Spanish," this person writes. (It should be noted that numerous Spanish-language spots have been produced, by *America Responds to AIDS*, the Ad Council, and other sources. Obviously, these campaign planners have failed to reach this large state, major-market radio station with their correspondence or their audio tapes.) Finally, one PSA Director from a suburban Texas station criticized campaign planners for not making accomodations at the end of each spot for a "local tag" to direct listeners to community resources.

The HIV-/AIDS threat

The statistics clearly show that HIV infection and AIDS pose a threat to people who live in the states of concern in this survey. As of 1992, the incidence rate of AIDS per capita was 19.2 per 100,000 in Texas; 11.2 per 100,000 in Missouri; 8.6 per 100,000 in Arkansas; 6.2 per 100,000 in Oklahoma (Chu, Berkelman, and Curren, 1992). Yet the broadcasters were divided over the threat faced by members of their audience. Slightly more than half agreed that the local threat is equal to or greater than the national threat. About one-third third were not sure, and 17% disagreed that the threat of AIDS is equal or greater in their community than it is nationally.

Limitations

The effort to understand the opinions and actions of broadcasters in regard to HIV-/AIDS PSAs was limited by the size and scope of the research. There are approximately 1,100 television broadcast stations, 9,000 television cable systems, and 9,900 radio stations broadcasting in the United States (Reddy, 1994). Even though the states chosen for survey have about 8.7% of the nation's total population of 260 million people (*Statistical abstract of the United States*, 1994) the states have only 5.82% of the population of radio broadcast

stations (*Broadcasting & Cable Yearbook*, 1994). The survey takes into consideration the opinions and policies of only .0049% of all the radio stations currently broadcasting in the U.S.

The response rate was not what some researchers might consider acceptable. Babbie believes a mail-in survey response rate of 50 percent is considered only "adequate" for generating conclusions, although he also admits that ". . . and a demonstrated lack of response bias is far more important than a high response rate" (1990, p. 182).

But on the other hand, the survey is also one of the first--if not *the* first of its type. In three years of researching this topic, the author has found no evidence of any other survey to determine what broadcasters think about AIDS PSAs and whether they use them. Furthermore, in his 15 years of work experience in broadcasting, the author has never had contact by any researcher in regard to use of AIDS PSAs (or any other type of PSA, for that matter). And, of those broadcasters who responded to this survey, most reported similar experiences: 75.5% indicated they had never been surveyed in regard to the issue of AIDS, and 68.7% indicated they "never" or only "once in a great while" had been surveyed on any subject relating to their jobs.

Applications

The broadcast media offer us perhaps our best hope to educate people to the dangers of HIV infection and AIDS--and to get people to stop risky behaviors. Unfortunately, in many ways, the broadcast media are not living up to their potential. Despite the fact that there has been significant attention to AIDS issues through fiction and non-fiction programming, there's insufficient documentation of a public health benefit. As a result, it is felt by many that we must do more research to create effective programming that people most likely to be at risk will pay attention to. This effort, though small, will assist in that process.

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The results of this inquiry will help us better understand broadcasters and the critical role they play in the dissemination of information about AIDS. It will allow for a determination of the extent to which radio stations in this region of the country are broadcasting AIDS public service announcements. Some understanding will be gained about the broadcast personnel making those decisions, and the factors which influence their gatekeeping function. The results will illustrate what some broadcasters think about the current genre of PSAs, whether they've ever been contacted by PSA campaign planners, and whether the AIDS spots made available by those planners are addressing the AIDS threat in the local communities. There are many opportunities for future research as well, as these same research questions could be easily adapted to a national survey.

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Appendix A

List of stations for survey (by market)

Market #	Location	Stations chosen for survey
9	Dallas-Fort Worth TX	10
10	Houston-Galveston TX	10
21	St. Louis MO	10
42	San Antonio-Victoria TX	10
51	Oklahoma City OK	10
59	Tulsa OK	10
68	Austin TX	10
71	Little Rock AR	10
103	El Paso TX	10
119	Tyler-Longview TX	**
124	McAllen-Brownsville-Harlingen TX	10
139	Beaumont-Port Arthur TX	10
143	Waco TX	**
163	Corpus Christi TX	10
190	Fort Smith AR	10
195	Lubbock TX	10
201	Joplin MO	**
203	Wichita Falls TX	**
210	Amarillo TX	10
211	Fayetteville-Springdale AR	10
212	Odessa-Midland TX	10
218	Killeen-Temple TX	10
222	Texarkana TX/AR	**
225	Columbia MO	10
238	Abilene TX	**
252	Bryan-College Station TX	**
257	San Angelo TX	**

Where (**) is indicated above, the market size was insufficient to allow selection of ten qualified radio stations. In these cases, additional stations were chosen at random from the rural radio (non-market) population to complete the selections. To avoid possible bias, the Lawton, OK market was not used. Ten stations were chosen at random from the rural radio (non-market) population in Oklahoma to compensate.

Therefore, the total sample population is as follows:

151 Texas market radio stations	29 Texas rural radio stations
25 Arkansas market radio stations	15 Arkansas rural radio stations
23 Missouri market radio stations	17 Missouri rural radio stations
20 Oklahoma market radio stations	20 Oklahoma rural radio stations

Total sample for survey: **219 market radio stations & 81 rural stations = 300 stations**

Appendix B

Research Questions/ Instrument

A break down of how the survey instrument addresses the research questions:

- What percentage of radio stations report using AIDS PSAs?;
  Addressed in survey questions 1, 2, 3, 4, 5, 6, and 9 (qualitative responses);

- To what extent are these PSAs being broadcast?;
  Addressed in survey questions 12, 13, and 14 (qualitative and quantitative);

- What factors weigh into broadcasters' decisions on use of AIDS PSAs?;
  Addressed in 7, 8, 10, 11, and 15--21 (qualitative and quantitative)

- What do broadcasters think about the AIDS threat, and efforts to address it through PSAs?
  Addressed in questions 22 through 40 (qualitative and quantitative);

The main dependent variable--the extent to which PSA directors report using AIDS public service announcements--is addressed in questions 9, 12, and 13. Independent variables include availability of PSAs for use (questions 10 and 11), organizational restrictions (questions 15, 16, 17, and 18), service to community (questions 21, 22-25, 28, 29, 35, and 40), personal like/dislike of the spots (26, 27, 30-34), and assistance/support from PSA campaign planning organizations (36-39).

The questionnaire collected ancillary data on respondents' station organization (1, 2, 3, 4), professional qualifications, duties, and career satisfaction (4-8) and station programming (12, 14). The responses to these questions illustrate some of the more dynamic issues in regard to broadcasters' use of the AIDS announcements.

Broadcasters Survey

This survey is designed to help us find out more about you as a broadcaster, your radio station, and your opinions of HIV-/AIDS public service announcements (PSAs). We're interested specifically in finding out:

- Whether you broadcast HIV-/AIDS PSAs
- How you make the decision to broadcast (or not broadcast) them
- What you think about the HIV-/AIDS PSAs made available for broadcast

Your participation in this survey is voluntary. No effort will be made to identify you or your radio station. You are entitled to a copy of the results, if you so desire.

If you wish to participate, it will probably take you about 10 minutes to complete the 40-item questionnaire. You may return the form in the enclosed stamped envelope. Thank you!

First... Tell Us About Yourself

Please check the appropriate responses below to help us understand more about you and your radio station:

1. Your radio station is: ☐ a public radio station ☐ a commercial radio station

2. The market you serve would best be considered:
   ☐ RURAL ☐ SUBURBAN ☐ URBAN

3. How would you describe your format? _____.

4. Your specific job title is: _____.

5. How many years have you worked in a broadcast programming position?_____.

6. What is your highest level of education?
   - ☐ some high school
   - ☐ high school graduate
   - ☐ some college
   - ☐ college graduate
   - ☐ post-graduate work or degree

7. How would you characterize yourself, in terms of your general outlook on life?
   - ☐ very conservative
   - ☐ somewhat conservative
   - ☐ neutral
   - ☐ somewhat liberal
   - ☐ very liberal

8. How satisfied are you with your job and you radio station, generally?
   - ☐ very satisfied
   - ☐ somewhat satisfied
   - ☐ neutral
   - ☐ somewhat dissatisfied
   - ☐ very dissatisfied

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Now... Tell Us About Your Radio Station

Please complete the following questions to help us understand your station and its use of PSAs:

9. Does your station broadcast HIV-/AIDS PSAs? ☐ YES ☐ NO

10. If you **have** broadcast PSAs dealing with HIV infection or AIDS, where did the spots originate?:
- ☐ from "America Responds to AIDS"/ Centers for Disease Control
- ☐ from the Ad Council
- ☐ from state health department
- ☐ from another public or private entity
- ☐ do not know/can't remember

11. If you **have not** broadcast HIV-/AIDS PSAs, why?
- ☐ Have never been offered any for consideration
- ☐ Do not use any PSAs
- ☐ HIV-/AIDS subject matter is inappropriate for our station/format
- ☐ HIV-/AIDS subject matter is inappropriate for our community
- ☐ Other (Please indicate:)

_____

Please continue...

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12. Please estimate the total amount of air time your station dedicates to PSAs of any kind each day:
- ☐ more than 60 minutes
- ☐ 30 to 60 minutes
- ☐ 15 to 30 minutes
- ☐ 0 to 15 minutes

13. Please estimate the total amount of air time your station dedicates to HIV-/AIDS PSAs each day:
- ☐ more than 60 minutes
- ☐ 30 to 60 minutes
- ☐ 15 to 30 minutes
- ☐ 0 to 15 minutes

14. Which of the following issues have been dealt with in PSAs aired on your station? (Check any that apply):

☐ Alzheimer's Disease	☐ Arts/cultural events	☐ Birth defects
☐ Cancer	☐ Child immunization	☐ Crime prevention
☐ Heart disease	☐ High blood pressure	☐ Home safety
☐ Radon gas	☐ Safety belt use	☐ Selective service
☐ Tuberculosis	☐ Veterans issues	☐ Voter registration

☐ Others? Please give example(s):_____

...Tell Us How You Decide

Your answers to the following questions will help us understand how you make decisions about the public service announcements aired on your station:

15. How much of your time is devoted to screening and producing PSAs for broadcast?
- ☐ 100% - all of my time
- ☐ at least 75%
- ☐ at least 50%
- ☐ at least 25%
- ☐ less than 25%

16. To what extent do you use your own judgement about PSAs that are broadcast?
- ☐ I have sole decision-making authority
- ☐ I work together with others to make decisions
- ☐ I have a voice in the decision-making process
- ☐ I have no decision-making involvement whatsoever

17. Please identify the job titles of anyone else involved in the process:

18. Does your station impose any particular restrictions on PSAs? Please explain:

19. Prior to this experience, have you ever answered any kind of a survey about the programming broadcast on your radio station?
- ☐ yes, very often
- ☐ not very often
- ☐ once in a great while
- ☐ never before

20. Prior to this experience, have you ever answered any kind of a survey about HIV-/AIDS?

- ☐ yes, very often
- ☐ not very often
- ☐ once in a great while
- ☐ never before

21. Do you have any personal knowledge of people who have HIV-/AIDS:

- ☐ No one I know has HIV/AIDS
- ☐ Someone I know **may** have HIV/AIDS
- ☐ Someone I know has been diagnosed with HIV/AIDS
- ☐ Someone I know died of AIDS

Please continue...

...Tell Us What You Think

Now we'd like to find out what you think, in general, about PSAs having to do with HIV infection and AIDS. Please read the questions which follow, and mark your response with an "X" in the appropriate box. Please answer the questions even if your station chose not to broadcast any HIV-/AIDS PSAs made available to you.

5 = Strongly agree 4 = Agree 3 = Neutral 2 = Disagree 1= Strongly disagree

	Question:	5	4	3	2	1
22.	HIV infection and AIDS is a great national public health threat.					
23.	HIV infection and AIDS is an equal or greater threat in my community than it is in most places.					
24.	It is important for radio stations to broadcast PSAs dealing with HIV infection and AIDS.					
25.	My station's listeners seek out information about HIV-/AIDS.					
26.	The PSAs I have listened to, or broadcast, effectively portray the potential dangers of HIV- transmission and AIDS.					
27.	I believe the PSAs are realistic in their portrayal of the HIV-/AIDS public health threat.					
28.	I believe the overall message of HIV-/AIDS PSAs makes a strong "connection" with my station's listening audience.					
29.	The language and presentation of HIV-/AIDS PSAs is appropriate for my station, format, and audience.					
30.	HIV-/AIDS PSAs specifically identify "unsafe" personal behaviors.					
31.	HIV-/AIDS PSAs motivate people to stop unsafe behaviors.					
32.	The tone of the HIV-/AIDS PSAs, overall, is positive and encouraging.					
33.	The people portrayed in the HIV-/AIDS PSAs are good role models.					
34.	The HIV-/AIDS PSAs are entertaining to listen to.					
35.	The PSAs direct the audience to effective sources for additional information.					
36.	The organizations which produce the PSAs demonstrate an interest in working with broadcasters to develop the messages.					
37.	I believe that my opinion as a broadcaster is important to the people who develop HIV/AIDS PSA campaigns.					
38.	I would be interested in obtaining additional PSAs dealing with HIV- infection and AIDS for broadcast on my station.					

39. Have you ever been contacted by a representative of "America Responds to AIDS" or any other HIV/AIDS PSA campaign? If so, would you please tell us a little about the experience(s) and your level of satisfaction?:

40. Do you have any suggestions for other use of radio as a broadcast medium for assisting in the fight against HIV-/AIDS or any other public health threat?

Thank you for your time. If you wish to offer any additional comments, please feel free to do so on this form or on another sheet of paper. This questionnaire was mailed to you with a pre-addressed, stamped envelope. Upon completing your responses, please fold the questionnaire and mail. If you wish, you may FAX the completed survey (any time) to (405) 581-5571.

Your responses will be held in strict confidence.
No effort will be made to identify you or your station.
To obtain the results of this survey, please write the authors under separate cover.

Broadcasters Survey
c/o Cameron University
Research Office
Lawton, OK 73505

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